

BEST AVAILABLE COPY

ISSUE SLIP STATE OF TEXAS (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	NW	71534	12-03-91
OLP.E. CLASSIFIER			5/1/93
FORMALITY REVIEW		Mell	8/20/99

9/13/99

INDEX OF CLAIMS

☐ Rejected N ☐ Non-elected
☐ Allowed I ☐ Interference
 (Through numerals) Canceled A ☐ Appeal
☐ Restricted O ☐ Objected

Claim	Date	Claim	Date	Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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